Case 23-13491-mdc Doc 19 Filed 01/15/24 Entered 01/15/24 13:47:20 Desc Main

CLOCK VCIDOCUMENT 0000380075 1

Page 1 of 3 **Earnings Statement**



AMERIBEST HOME CARE 990 SPRING GARDEN ST SUITE 201 PHILADELPHIA PA 19123

Period Beginning: Period Ending:

09/03/2023 09/16/2023

Pay Date:

09/22/2023

CHINELLE M BALLARD 6414 CALLOWHILL STREET PHILADELPHIA PA 19151

Filing Status: Head of household

Exemptions/Allowances:

Federal: Standard Withholding Table

Earnings	rate hou	rs this period	year to date
Regular	13.5000 72.0	00 972.00	6,378.76
Overtime	20.2500 .2	25 5.06	1,316.25
HOLIDAY	20.2500 8.0	00 162.00	324.00
SignON BoNUS			500.00
TRAINING			50.00
	Gross Pay	\$1,139.06	8,569.01
Deductions	Statutory		
	Federal Income Tax	-33 .91	379.75
	Social Security Tax	-70 .62	531.28
	Medicare Tax	-16 .52	124.25
	PA State Income Ta	x -34 .97	263.07
	Philadelphia Income	Tax -42 .71	321.41
	PA SUI Tax	-0 .80	6.00
	Net Pay	\$939.53	
	Direct Deposit	-939 .53	

Other Benefits and Information	this	period	total	to	date
Pto Balance		13.44			
Totl Hrs Worked		72.25			
Important Notes					
COMPANY PH#:+1 215 925	3313	103			

BASIS OF PAY: HOURLY

Your federal taxable wages this period are \$1,139.06

AMERIBEST HOME CARE 990 SPRING GARDEN ST SUITE 201 PHILADELPHIA PA 19123

Advice number:

00000380075 09/22/2023

account number

transit ABA

amount

xxxxxxxxxxxxx5304

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\$939.53

NON-NEGOTIABLE Case 23-13491-mdc Doc 19 Filed 01/15/24 Entered 01/15/24 13:47:20 Desc Main

FILE DEPT. 108176 000410

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Page 2_of 3 **Earnings Statement**

AMERIBEST HOME CARE 990 SPRING GARDEN ST SUITE 201

Period Ending:

Period Beginning:

09/17/2023 09/30/2023

Pay Date:

10/06/2023

Filing Status: Head of household

PHILADELPHIA PA 19123

Exemptions/Allowances:

Federal: Standard Withholding Table

CHINELLE M BALLARD 6414 CALLOWHILL STREET PHILADELPHIA PA 19151

Earnings	rate ho	ours this period	year to date	Other Benefits and		
Regular	13.5000 76	.75 1,036.13	7,414.89	Information	this period	total to date
Overtime	20.2500 32	.00 648.00	1,964.25	Pto Balance	16.16	
Training Pay	10.0000 2	.75 27.50		Totl Hrs Worked	108.75	
HOLIDAY			324.00	TOU THS WORKED	100.70	
SignON BoNUS			500.00	Important Notes		
TRAINING			50.00	COMPANY PH#:+1 215 9	25 3313 103	
	Gross Pay	\$1,711.63	10,280.64			
				BASIS OF PAY: HOURLY		
Deductions	Statutory					
Doddonone	Federal Income Ta	x -97 .31	477.06			
	Social Security Tax	-106 . 12	637.40			
	Medicare Tax	-24 .82	149.07			
	PA State Income 7	Tax -52 .55	315.62			
	Philadelphia Income	e Tax -64 .19	385.60			
	PA SUI Tax	-1 .20	7.20			
	Net Pay	\$1,365.44				
	Direct Deposit	-1 ,365.44				
	Net Check	\$0.00				

Your federal taxable wages this period are \$1,711.63

AMERIBEST HOME CARE 990 SPRING GARDEN ST SUITE 201 PHILADELPHIA PA 19123

Advice number:

00000400074 10/06/2023

account number

transit ABA

amount

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\$1,365.44

NON-NEGOTIABLE

Case 23-13491-mdc Doc 19 Filed 01/15/24 Entered 01/15/24 13:47:20 Desc Main

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Page 3 of 3 **Earnings Statement**



AMERIBEST HOME CARE 990 SPRING GARDEN ST SUITE 201 PHILADELPHIA PA 19123

Period Beginning: Period Ending:

10/01/2023 10/14/2023

Pay Date:

10/20/2023

Filing Status: Head of household

Exemptions/Allowances:

Federal: Standard Withholding Table

CHINELLE M BALLARD 6414 CALLOWHILL STREET PHILADELPHIA PA 19151

Earnings	rate hou	irs this period	year to date	Other Benefits and		
Regular	13.5000 79.	50 1,073.25	8,488.14	Information	this period	total to date
Overtime			1,964.25	Pto Balance	18.14	
HOLIDAY			324.00	Totl Hrs Worked	79.50	
SignON BoNUS			500.00	TOU HIS WORKED	79.50	
TRAINING			50.00	Important Notes	_	
	Gross Pay	\$1,073.25	11,353.89	COMPANY PH#:+1 215 9	925 3313 103	
	Ŋ-					
Deductions	Statutory			BASIS OF PAY: HOURLY		
	Federal Income Tax	-27 .33	504.39			
	Social Security Tax	-66 . 54	703.94			
	Medicare Tax	-15 .56	164.63			
	PA State Income Ta	-32 .95	348.57			
	Philadelphia Income	Tax -40.25	425.85			
	PA SUI Tax	-0 .75	7.95			
	Net Pay	\$889.87				
	Direct Deposit	-889 .87				
	Net Check	\$0.00				

Your federal taxable wages this period are \$1,073.25

AMERIBEST HOME CARE 990 SPRING GARDEN ST SUITE 201 PHILADELPHIA PA 19123

00000420071 10/20/2023

account number

Advice number:

transit ABA

amount

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\$889.87

NON-NEGOTIABLE